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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

EASTERN DIVISION

In re:	Johnson, Rodney	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Case No. 07 B 10993				
	Debtor	\$ \$					
	CILL DEED 44 CEA			_			
	CHAPTER 13 STA	NDING TRUSTEE'S FIN	NAL REPORT AND ACCOUNT				
	Marilyn O. Marshall, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:						
	1) The case was	filed on 06/20/2007.					
	2) The plan was	confirmed on 08/22/2007.					
O	3) The plan was on 07/15/2009.	modified by order after confirm	nation pursuant to 11 U.S.C. § 1329				
p	4) The trustee fill blan on 06/17/2009.	led action to remedy default by	the debtor in performance under the				
	5) The case was	completed on 10/07/2010.					
	6) Number of m	onths from filing or conversion	to last payment: 40.				
	7) Number of m	onths case was pending: 42.					
	8) Total value of	assets abandoned by court ord	er: (NA).				
	9) Total value of	assets exempted: \$350.00.					
	10) Amount of u	nsecured claims discharged wit	hout full payment: \$6,555.00.				

11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor \$14,456.38

Less amount refunded to debtor \$273.42

NET RECEIPTS: \$14,182.96

Expenses of Administration:

Attorney's Fees Paid Through the Plan \$3,806.33

Court Costs \$0

Trustee Expenses & Compensation \$847.84

Other \$0

TOTAL EXPENSES OF ADMINISTRATION: \$4,654.17

Attorney fees paid and disclosed by debtor \$0

Scheduled Creditors:							
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid	
Robert J Adams & Associates	Priority	\$3,500.00	NA	NA	\$0	\$0	
Overland Bond & Investment Corp	Secured	\$15,640.00	\$6,150.00	\$6,150.00	\$6,150.00	\$723.34	
City Of Chicago Dept Of Revenue	Unsecured	\$180.00	\$300.00	\$300.00	\$300.00	\$0	
Infinity Healthcare Physicians	Unsecured	\$760.00	NA	NA	\$0	\$0	
Lincoln Park Hospital	Unsecured	\$835.00	NA	NA	\$0	\$0	
Omni Credit Service	Unsecured	\$20.00	NA	NA	\$0	\$0	
Overland Bond & Investment Corp	Unsecured	NA	\$2,355.45	\$2,355.45	\$2,355.45	\$0	
Quest Diagnostics Inc	Unsecured	\$90.00	NA	NA	\$0	\$0	
ST Francis Hospital - Evanston	Unsecured	\$2,635.00	NA	NA	\$0	\$0	
ST Francis Hospital - Evanston	Unsecured	\$1,365.00	NA	NA	\$0	\$0	
ST Francis Hospital - Evanston	Unsecured	\$100.00	NA	NA	\$0	\$0	
US Cellular	Unsecured	\$750.00	NA	NA	\$0	\$0	

Summary of Disbursements to Creditors:						
	Claim Allowed	Principal Paid	Interest Paid			
Secured Payments:						
Mortgage Ongoing	\$0	\$0	\$0			
Mortgage Arrearage	\$0	\$0	\$0			
Debt Secured by Vehicle	\$6,150.00	\$6,150.00	\$723.34			
All Other Secured	\$0	\$0	\$0			
TOTAL SECURED:	\$6,150.00	\$6,150.00	\$723.34			
Priority Unsecured Payments:						
Domestic Support Arrearage	\$0	\$0	\$0			
Domestic Support Ongoing	\$0	\$0	\$0			
All Other Priority	\$0	\$0	\$0			
TOTAL PRIORITY:	\$0	\$0	\$0			
GENERAL UNSECURED PAYMENTS:	\$2,655.45	\$2,655.45	\$0			

Disbursements:						
Expenses of Administration	\$4,654.17					
Disbursements to Creditors	\$9,528.79					
TOTAL DISBURSEMENTS:		\$14,182.96				

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12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Date: December 21, 2010 By: _/s/ MARILYN O. MARSHALL Trustee

STATEMENT: This Uniform Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.